Approved for use through 7/31/2006. OMB 0651-0032
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|   | PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 |   |   |  |                        |                        |                             |                             | Application of Docket Number        |  |                                     |
|---|---|---|---|--|------------------------|------------------------|-----------------------------|-----------------------------|-------------------------------------|--|-------------------------------------|
| CLAIMS AS FILED – PART I (Column 1) (Column 2)                            |   |   |   |  |                        | SMALL ENTITY           |                             |                             | OR                                  |  | R THAN<br>ENTITY                    |
|   | FOR   | NUMBE   | <u> </u>  |  |                        |                        | ATE                         | 555                         |                                     | DATE   | FEE                                 |
|   | IC FEE  | 1101113   | HOMBERTIEE  |  | HOMBERTENING           |                        | AIE _                       |                             | 0.0                                 | RAIE   | \$                                  |
| TOTAL CLAIMS  |   | 16  | // minus 20 =   |  |                        |                        |                             | <u> </u>                    |                                     |  | <u> </u>                            |
| IND   | PENDENT CLAIN   | is 5  | 1 2   |  | 1.                     |                        | <u> </u>                    | -                           | OR                                  |  |                                     |
| <u> </u>  |   |   |   |  | <u></u>                |                        |                             |                             | OR                                  | - * *=   | <u> </u>                            |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))                         |   |   |   |  |                        | + \$_                  | =                           |                             | OR                                  | + \$=  |                                     |
| * If the difference in column 1 is less than zero, enter "0" in column 2. |   |   |   |  |                        | TC                     | DTAL                        |                             | OR                                  | TOTAL  |                                     |
| CLAIMS AS AMENDED – PART II   |   |   |   |  |                        |                        |                             |                             |                                     |  |                                     |
|   |   | (Column 1)  |   |  | (Column 3)             | SMALL ENTITY           |                             | ENTITY                      | OR                                  |  |                                     |
| ENT A   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |   | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR  | PRESENT<br>EXTRA       | R                      | ATE                         | ADDI-<br>TIONAL<br>FEE      |                                     | RATE   | ADDI-<br>TIONAL<br>FEE              |
| ) MI  | Total<br>(37 CFR 1.16(c))   |   | Minus   | - 20   | =                      | x \$_                  |                             |                             | OR                                  | x \$   |                                     |
| AMEN  | Independent<br>(37 CFR 1.16(b))   | . 5   | Minus   | " S  |                        | x                      | =                           |                             | OR                                  | x \$=  |                                     |
|   | FIRST PRESENT   | ATION OF MULTIPLE   | E DEPEND  | ENT CLAIM (37 CF   | R 1.16(d))             | + 5                    | =                           |                             | OR                                  | +/5 =  |                                     |
| (Column 1) (Column 2) (Column 2)  |   |   |   |  |                        | TOT                    | AL.                         |                             |                                     | TOTAL  |                                     |
|   |   |   |   |  |                        | אסט                    |                             |                             | ) "/                                | ADDEFEE  |                                     |
| В   |   | CLAIMS  |   | HIGHEST  |                        |                        | ATE                         | ADDI                        | /                                   | DATE   | ADDI-                               |
| ΙΝΞ   |   | AFTER<br>AMENDMENT  |   | PREVIOUSLY<br>PAID FOR   | EXTRA                  |                        | A1E                         | TIONAL<br>FEE               |                                     | KAIE   | TIONAL<br>FEE                       |
|   | (37 CFR 1.16(c))  | *   | Minus   |  | =                      | × \$_                  | =                           |                             | OR                                  | x \$=  |                                     |
| Ę.  | Independent<br>(37 CFR 1.16(b))   | *   | Minus   | ***  | =                      | × \$_                  | =                           |                             | OR                                  | x \$=  |                                     |
| ¥   | FIRST PRESENT   | ATION OF MULTIPLE   | E DEPEND  | ENT CLAIM (37 CF   | R 1.16(d))             | + \$                   |                             |                             | OR                                  | +s =   |                                     |
| (Column 1) (Column 2) (Column 3)  |   |   |   |  |                        |                        |                             |                             | OR                                  | TOTAL<br>ADD'I FEE                                   |                                     |
|   |   |   |   |  |                        |                        |                             |                             |                                     |  | -                                   |
| O   |   | CLAIMS  | <u> </u>  |  |                        |                        |                             |                             |                                     |  |                                     |
|   |   | REMAINING<br>AFTER<br>AMENDMENT   |   | PREVIOUSLY<br>PAID FOR   | EXTRA                  | L R                    | ATE                         | ADDI-<br>TIONAL<br>FEE      |                                     | RATE   | ADDI-<br>TIONAL<br>FEE              |
| JME   | Total<br>(37 CFR 1.16(c))   | •   | Minus   | **   | =                      | x \$_                  |                             |                             | OR                                  | x \$=  |                                     |
| EN  | Independent<br>(37 CFR 1.16(b))   | *   | Minus   | ***  | =                      | × \$_                  | =                           |                             | OR                                  | x s=   |                                     |
| AM  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))         |   |   |  |                        |                        |                             |                             | OR                                  | + s=   | -                                   |
|   |   |   |   |  |                        |                        |                             |                             | OR                                  | TOTAL<br>ADD'L FEE                                   |                                     |
|   |   |   |   | v in column 2, write   |                        |                        | LFEE                        |                             | OK.                                 | ADDLFEE  |                                     |
|   | MENDMENT B AMENDMENT A S S S S S S S S S S S S S S S S S S              | FOR BASIC FEE (37 CFR 1.16(a)) TOTAL CLAIMS (37 CFR 1.16(c)) INDEPENDENT CLAIM (37 CFR 1.16(b)) MULTIPLE DEPENDE  * If the difference in c  CL  V LNA  Total (37 CFR 1.16(c)) Independent (37 CFR 1.16(b)) FIRST PRESENT  Total (37 CFR 1.16(c)) Independent (37 CFR 1.16(c)) FIRST PRESENT  O LNA  Total (37 CFR 1.16(c)) Independent (37 CFR 1.16(c)) | CLAIMS AS (Coli  FOR NUMBE BASIC FEE (37 CFR 1.16(a))  TOTAL CLAIMS (37 CFR 1.16(b))  MULTIPLE DEPENDENT CLAIM PRESEN  If the difference in column 1 is less that  CLAIMS AS AMI  (Column 1)  CLAIMS  REMAINING  AFTER  AMENDMENT  Total (37 CFR 1.16(b))  FIRST PRESENTATION OF MULTIPLE  (COlumn 1)  (Column 1) | CLAIMS AS FILED (Column 1)  FOR NUMBER FILED  BASIC FEE (37 CFR 1.16(a))  TOTAL CLAIMS (37 CFR 1.16(b))  MULTIPLE DEPENDENT CLAIM PRESENT (COlumn 1)  CLAIMS AS AMENDED  (Column 1)  CLAIMS REMAINING AFTER AMENDMENT  Independent (37 CFR 1.18(b))  FIRST PRESENTATION OF MULTIPLE DEPEND  (Column 1)  (Column 1) | CLAIMS AS FILED - PART | CLAIMS AS FILED - PART | Substitute for Form PTO-875 | Substitute for Form PTO-875 | CLAIMS AS FILED - PART   (Column 2) | Substitute for Form PTO-875   CLAIMS AS FILED - PART | CLAIMS AS FILED - PART I (Column 1) |

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.